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Jun 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N42686** (8)

1. Corporation Name

CHRISTIAN FELLOWSHIP ALIVE MINISTRIES, INC.

Principal Place of Business

Mailing Address

**2280 S.E. LUCAYA ST
PORT ST LUCIE FL 34952**

**PO BOX 8422
PORT ST LUCIE FL 34985-8422
US**



3. Date Incorporated or Qualified

03/21/1991

4. FEI Number

59-3058824

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 3891 Edwards Rd.

Suite, Apt. #, etc.

22 City & State

23 Ft. Pierce, Florida

Zip

24 34981

Country

25 St. Lucie

2a. Mailing Address

Post Office Box 8422

Suite, Apt. #, etc.

27 City & State

28 Port St. Lucie, Florida

Zip

29 34985-8422

Country

30 St. Lucie

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BAUMGARDNER, MICHAEL A.
2280 S.E. LUCAYA ST
PORT ST LUCIE FL 34952**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **BAUMGARDNER, MICHAEL A**
STREET ADDRESS **2280 S.E. LUCAYA ST**
CITY-ST-ZIP **PORT ST LUCIE FL 34952**

1.1 TITLE **PD** ☐ Change ☐ Addition
1.2 NAME **Baumgardner, Michael A**
1.3 STREET ADDRESS **5555 Ideal Holding Dr.**
1.4 CITY-ST-ZIP **Ft. Pierce, FL. 34988**

TITLE **VT** ☐ DELETE
NAME **BAUMGARDNER, JOYCE**
STREET ADDRESS **2280 S.E. LUCAYA ST**
CITY-ST-ZIP **PORT ST LUCIE FL 34952**

2.1 TITLE **VT D** ☐ Change ☐ Addition
2.2 NAME **Baumgardner, Joyce**
2.3 STREET ADDRESS **5555 Ideal Holding Dr.**
2.4 CITY-ST-ZIP **Ft. Pierce, FL. 34988**

TITLE **S** ☐ DELETE
NAME **BAUMGARDNER, TRACY L**
STREET ADDRESS **2282 MCMASTER AVE**
CITY-ST-ZIP **PORT ST LUCIE FL 34952**

3.1 TITLE **S D** ☐ Change ☐ Addition
3.2 NAME **Baumgardner, Tracy L.**
3.3 STREET ADDRESS **2281 McMaster Ave**
3.4 CITY-ST-ZIP **Port St. Lucie, FL. 34952**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **Robert B. Peyton (Benny)**
4.3 STREET ADDRESS **802 Headrow Terrace**
4.4 CITY-ST-ZIP **Hampton, Va. 23666**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: **Michael A. Baumgardner, President**

3/19/1998 561-489-9897

CR2E037 (10/97)